

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

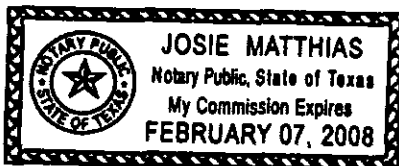
FORM COR-C/OH

6719

1 ACCOUNT # 78000000	2 PAGE # 1 of 38	
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR Hon. FIRST Gregory MI NICKNAME LAST SUFFIX Greg Hamilton	OFFICE USE ONLY Date Received 2008 JAN 31 PM 4:39 Date Hand-delivered Date Postmarked Receipt # Amount Legal Totals Date Processed Date Imaged
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final Report	Date Received 2008 JAN 31 PM 4:39 Date Hand-delivered Date Postmarked Receipt # Amount Legal Totals Date Processed Date Imaged
5 ORIGINAL PERIOD COVERED	Month Day Year Month Day Year 07/01/2007 THROUGH 12/31/2007	Date Received 2008 JAN 31 PM 4:39 Date Hand-delivered Date Postmarked Receipt # Amount Legal Totals Date Processed Date Imaged

6 EXPLANATION OF CORRECTION

Left contribution balance off original report (\$20,546.58). Left contributions from 12/12/07 deposit off report because deposit record had been misplaced. These previously omitted contributions are as follows (details follow in amended schedule A): Davis \$50; Fox \$100; Orr & Olavson \$500; Reitz \$50; Singleton \$100; Winkelman \$125 and total \$925. Recognized loans from Greg Hamilton to campaign on 10/3/2007 and 10/04/2007 to cover expenses in association with Los Angeles trip. Deleted 11/09/07 expenditure to Bentley's Restaurant (\$20.32) from schedule G--receipt actually reads 11/09/05 but is barely legible. Corrected amount of out-of-pocket expenditure 10/03/07 to Noe's Bar to \$29.36 to include tip amount. Amended purpose of the following expenditures to correct or provide more detail: 10/23 Bells Int'l; 11/14 Big Lots; 12/5 Greg Hamilton; 7/31 HEB; 8/14 Hilton Airport; 10/8 & 11/26 Hobby Lobby; 10/17 Lost Creek Country Club; 10/8 Rockfish; 8/13 & 11/13 Sam's Club; 8/22 & 10/25 Texas Land & Cattle. Deleted 8/10 \$1,000 contribution to Sheriff's Memorial Benevolent Society from Schedule I (check voided).

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:



I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Gregory Hamilton

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Greg Hamilton this the 31st day of January, 2008, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 78000000		2 PAGE # 2 of 38								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Hon. Gregory		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount	Date Processed		Date Imaged			
	Receipt #	Amount										
Date Processed												
Date Imaged												
NICKNAME LAST SUFFIX Greg Hamilton												
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE PO Box 5674 Austin, TX 78763-5674											
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Hon. Gregory											
	NICKNAME LAST SUFFIX Greg Hamilton											
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1605 Augusta Bend Hutto, TX 78634-5387											
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 797-4992											
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final report (Attach C/OH - FR)</td> </tr> </table>				<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final report (Attach C/OH - FR)
<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)									
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final report (Attach C/OH - FR)									
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2007 THROUGH 12/31/2007											
10 ELECTION	ELECTION DATE Month Day Year 11/04/2008		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special									
11 OFFICE	OFFICE HELD (if any) Travis County Sheriff		12 OFFICE SOUGHT (if known) Travis County Sheriff									
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	. . Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. . .											
	Name											
	Address/PO Box: Apt. / Suite #: City: State: Zip Code											

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME** Hamilton, Gregory (Hon.)**15 ACCOUNT #** (Ethics Commission filers)
78000000**16 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

60.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

17,440.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

232.45

4. TOTAL POLITICAL EXPENDITURES

\$

12,098.98

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

20,546.58

**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

18 AFFIDAVITI swear, or affirm, under penalty of perjury, that the accompanying report
is true and correct and includes all information required to be reported by
me under Title 15, Election Code.

Gregory Hamilton

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/12 Report: 4/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

11/19/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Balagia, David

6 Contributor address; City; State; Zip Code
PO Box 1748
Austin, TX 78767

7 Amount of
contribution (\$) \$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beasley, Roger

11/09/2007

Contributor address; City; State; Zip Code
PO Box 9366
Austin, TX 78766

Amount of
contribution (\$) \$1,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bennett, Gary

11/19/2007

Contributor address; City; State; Zip Code
1403 W Beach Rd
Waukegan, IL 60087

Amount of
contribution (\$) \$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bennett, Ryan

11/19/2007

Contributor address; City; State; Zip Code
700 S Twilight Mesa
Austin, TX 78737

Amount of
contribution (\$) \$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Blackwell, Betty

11/08/2007

Contributor address; City; State; Zip Code
1306 Nueces St
Austin, TX 78701

Amount of
contribution (\$) \$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/12 Report: 5/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date
11/17/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Call Phonograph, LLC

6 Contributor address; City; State; Zip Code
905 E 7th St
Austin, TX 78702

7 Amount of contribution (\$)
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cherico, Craig

11/19/2007

Contributor address; City; State; Zip Code
PO Box 10173
Austin, TX 78766

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Davis, Charlie

12/04/2007

Contributor address; City; State; Zip Code
114 Springbrook Pt
Hot Springs, AR 71913

Amount of contribution (\$)
\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
DeGado, Benjamin

11/19/2007

Contributor address; City; State; Zip Code
2403 Spring Wagon Ln
Austin, TX 78728

Amount of contribution (\$)
\$110.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
DeRoeck, Walter

11/15/2007

Contributor address; City; State; Zip Code
3107 Above Strafford Pl
Austin, TX 78746

Amount of contribution (\$)
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/12 Report: 6/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Fox, Bruce

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

12/04/2007

6 Contributor address; City; State; Zip Code
404 W 13th St
Austin, TX 78701

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fresch, Deloris

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
11205 Hidden Bluff Dr
Austin, TX 78754

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fulbright & Jaworski LLP Texas Committee

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/02/2007

Contributor address; City; State; Zip Code
1301 McKinney, Ste 5100
Houston, TX 77010

\$500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Garza, Rolando

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
4019 Amy Cr
Austin, TX 78759

\$110.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Granger & Mueller, PC

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/15/2007

Contributor address; City; State; Zip Code
605 W 10th St
Austin, TX 78701

\$500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/12 Report: 7/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date
11/19/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerra, Eddie

6 Contributor address; City; State; Zip Code
1718 E 38th St
Austin, TX 78722

7 Amount of
contribution (\$)
\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerra, Phil

11/19/2007

Contributor address; City; State; Zip Code
10201 Wind Cave Trl
Austin, TX 78748

Amount of
contribution (\$)
\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerra, Raymond

11/19/2007

Contributor address; City; State; Zip Code
1000-B Beaver Trl
Austin, TX 78746

Amount of
contribution (\$)
\$120.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hale, Roy

11/06/2007

Contributor address; City; State; Zip Code
8505-A Apple Carrie Cv
Austin, TX 78745

Amount of
contribution (\$)
\$125.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hardge, Michael

11/19/2007

Contributor address; City; State; Zip Code
1816-B Prairie Knoll Ct
Austin, TX 78758

Amount of
contribution (\$)
\$110.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/12 Report: 8/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission files)
780000004 Date

11/19/20075 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hatton, Brad6 Contributor address; City; State; Zip Code
6801 Manzanita St
Austin, TX 787597 Amount of
contribution (\$) \$100.008 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Havener, Gary

11/19/2007

Contributor address; City; State; Zip Code
1512 Santolina Ct
Pflugerville, TX 78660Amount of
contribution (\$) \$110.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Henson, Diane (Hon.)

11/13/2007

Contributor address; City; State; Zip Code
908 Terrace Mountain Dr
Austin, TX 78746Amount of
contribution (\$) \$100.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Henson, Diane (Hon.)

11/19/2007

Contributor address; City; State; Zip Code
908 Terrace Mountain Dr
Austin, TX 78746Amount of
contribution (\$) \$20.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, Michael

11/15/2007

Contributor address; City; State; Zip Code
1909 Leona #201
Austin, TX 78722Amount of
contribution (\$) \$250.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/12 Report: 9/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Keel & Nassour, LLP

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

11/19/2007

6 Contributor address; City; State; Zip Code
508 W 14th St
Austin, TX 78701

\$750.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lebermann, Lowell

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/15/2007

Contributor address; City; State; Zip Code
3834 Promontory Point Dr
Austin, TX 78744

\$1,000.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Long, Darren

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
PO Box 1748
Austin, TX 78767

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mancias, Manny

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
1305 Honey Suckle Cr
Pflugerville, TX 78660

\$60.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mancias, Mike

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
PO Box 2531
Pflugerville, TX 78691

\$10.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/12 Report: 10/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date
11/09/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Maud, Doug

6 Contributor address; City; State; Zip Code
PO Box 1608
Austin, TX 78767

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)
\$500.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
May, Bill

11/19/2007

Contributor address; City; State; Zip Code
2309 Gatlin Gun
Austin, TX 78739

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
McCurry, Oliver

11/19/2007

Contributor address; City; State; Zip Code
3400 Shoreline Dr Apt 234
Austin, TX 78728

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
McKinney, Brian

11/19/2007

Contributor address; City; State; Zip Code
Kevin Ln
Austin, TX 78738

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mercer, James

11/15/2007

Contributor address; City; State; Zip Code
15710 Voelker Lane
Elgin, TX 78621

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$125.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/12 Report: 11/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
780000004 Date

11/19/20075 Full name of contributor ☐ out-of-state PAC (ID# _____)
Michalik, Tava6 Contributor address; City; State; Zip Code
8010 Cardin Dr
Austin, TX 787597 Amount of
contribution (\$) \$120.008 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miller, Keith

11/19/2007

Contributor address; City; State; Zip Code
109 E Nakoma
Round Rock, TX 78664Amount of
contribution (\$) \$370.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mills, Tonya

11/19/2007

Contributor address; City; State; Zip Code
1333 Boenig Dr
New Braunfels, TX 78130Amount of
contribution (\$) \$100.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mosher, James JD

07/25/2007

Contributor address; City; State; Zip Code
6062 Graham Hill Rd, Ste 8
Fellton, CA 95018Amount of
contribution (\$) \$100.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Munoz, Arthur

11/10/2007

Contributor address; City; State; Zip Code
1003 Fall Creek
Austin, TX 78753Amount of
contribution (\$) \$125.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/12 Report: 12/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date
12/04/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Orr and Olavson, PC

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
804 Rio Grande St
Austin, TX 78701

\$500.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
11/19/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Papst, Greg

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1504 Pagedale Dr
Cedar Park, TX 78613

\$120.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
11/22/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Perez, Paul

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4917 Scottish Thistle Dr
Austin, TX 78739

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/08/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Perry, Edgar III

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1114 Lost Creek Blvd, Ste 270
Austin, TX 78746-6376

\$1,000.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
11/22/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Preston, Dorothy

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1306 Jefferis Ave
Killeen, TX 76543

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/12 Report: 13/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date

12/04/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Reitz, David6 Contributor address; City; State; Zip Code
10692 WCR 28
Ft Lupton, CO 806217 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

11/19/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rhoades, GabaralContributor address; City; State; Zip Code
820 W 3rd St
Eddy, TX 76524Amount of
contribution (\$)

\$110.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/10/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rick Freeman, PCContributor address; City; State; Zip Code
811 Barton Springs Rd, Ste 740
Austin, TX 78704-6111Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ringer, FrankContributor address; City; State; Zip Code
11828 Shropshire
Austin, TX 78753Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/24/2007

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ringer, FrankContributor address; City; State; Zip Code
11828 Shropshire
Austin, TX 78753Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/12 Report: 14/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)

78000000

4 Date

11/16/2007

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sheehan, Michelle

6 Contributor address; City; State; Zip Code
PO Box 856
Pflugerville, TX 78691

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shelton, Sidney

11/19/2007

Contributor address; City; State; Zip Code
11811 Arhamn Ln
Manor, TX 78653

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Singleton, Wayne

12/04/2007

Contributor address; City; State; Zip Code
3402 Harpers Ferry Ln
Austin, TX 78745

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stanley, Alfred

11/19/2007

Contributor address; City; State; Zip Code
1409 Hardouin Ave
Austin, TX 78703

Amount of
contribution (\$)

\$120.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Templeton, James

11/19/2007

Contributor address; City; State; Zip Code
8800 Spicewood Ct
Austin, TX 78759

Amount of
contribution (\$)

\$220.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/12 Report: 15/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)

78000000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Travis County Sheriff's Law Enforcement Association PAC

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

11/16/2007

6 Contributor address; City; State; Zip Code
8600 N FM 620
Austin, TX 78726

\$250.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Travis County Sheriff's Law Enforcement Association PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
8600 N FM 620
Austin, TX 78726

\$2,250.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Warren, Louis

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
4731 Cat Mountain Dr
Austin, TX 78731

\$2,500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Winkelman, Marc

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/04/2007

Contributor address; City; State; Zip Code
304 Hillcrest Ct
Austin, TX 78746

\$125.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wynn, John

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/19/2007

Contributor address; City; State; Zip Code
1940 Prairie Rock Way
Round Rock, TX 78664

\$110.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 16/38

2 FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)

78000000

4 TOTAL OF UNITEMIZED LOANS:

⇒⇒⇒⇒⇒⇒

\$

5 Date of loan
10/03/2007**7** Name of lender
Hamilton, Greg☐ out-of-state PAC (ID# _____)**9** Loan Amount (\$)

\$17.31

6 Is lender a
financial institution?

No**8** Lender address; City; State; Zip Code
1605 Augusta Bend
Hutto, TX 78634-5387**10** Interest rate
0**11** Maturity date
12/05/2007**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☒ none**15** GUARANTOR
INFORMATION**16** Name of guarantor**18** Amount Guaranteed (\$)☒ not applicable**17** Guarantor address; City; State; Zip Code**19** Principal Occupation**20** EmployerDate of loan
10/04/2007Name of lender
Hamilton, Greg☐ out-of-state PAC (ID# _____)

Loan Amount (\$)

\$258.02

Is lender a
financial institution?

NoLender address; City; State; Zip Code
1605 Augusta Bend
Hutto, TX 78634-5387Interest rate
0Maturity date
12/05/2007

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☒ noneGUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☒ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation

Employer

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/16 Report: 17/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

11/21/2007**5** Payee name
Accent Trophies & Awards**7** Amount
(\$)

\$187.16**6** Payee address; City; State; Zip Code
1901 W William Cannon
Austin, TX 78745**8** Purpose of payment (See instructions regarding type of information required.)
Trophies for fund-raising golf tournament**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Austin AFL-CIO CouncilAmount
(\$)

10/08/2007

Payee address; City; State; Zip Code
PO Box 684644
Austin, TX 78768

\$310.00

Purpose of payment (See instructions regarding type of information required.)

Program ad

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Austin-Bergstrom International Airport ParkingAmount
(\$)

10/02/2007

Payee address; City; State; Zip Code
3600 Presidential Blvd #411
Austin, TX 78759

\$18.00

Purpose of payment (See instructions regarding type of information required.)

LAPD Trip Parking

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
AustinutsAmount
(\$)

12/19/2007

Payee address; City; State; Zip Code
2900 W Anderson Ln
Austin, TX 78757

\$129.87

Purpose of payment (See instructions regarding type of information required.)

Secretary Christmas Gifts

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/16 Report: 18/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date**5** Payee name

Bells Int'l

7Amount
(\$)

10/23/2007

6 Payee address;

City; State; Zip Code

109 Denson Dr
Austin, TX 78752

\$307.80

8 Purpose of payment (See instructions regarding type of information required.)

Awards for Sheriff's Office event

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Bells Int'l

Amount
(\$)

11/07/2007

Payee address;

City; State; Zip Code

109 Denson Dr
Austin, TX 78752

\$185.42

Purpose of payment (See instructions regarding type of information required.)

Sheriff's Office event

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Big Lots

Amount
(\$)

11/14/2007

Payee address;

City; State; Zip Code

6929 Airport Blvd #11
Austin, TX 78752

\$270.61

Purpose of payment (See instructions regarding type of information required.)

Prize (DVD player) for Employee Appreciation

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Burnet Road Self Storage

Amount
(\$)

08/09/2007

Payee address;

City; State; Zip Code

6400 Burnet Rd
Austin, TX 78757

\$216.00

Purpose of payment (See instructions regarding type of information required.)

Storage of signs

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/16 Report: 19/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date 11/26/2007	5 Payee name Burnet Road Self Storage	7 Amount (\$) \$98.00
6 Payee address; City; State; Zip Code 6400 Burnet Rd Austin, TX 78757		

8 Purpose of payment (See instructions regarding type of information required.)
Storage for campaign signs9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 07/25/2007	Payee name Capital Area Democratic Women PAC	Amount (\$) \$250.00
Payee address; City; State; Zip Code P. O. Box 12962 Austin, TX 78711		

Purpose of payment (See instructions regarding type of information required.)
sponsorship of event** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 12/13/2007	Payee name Capital Rubber Stamp	Amount (\$) \$20.57
Payee address; City; State; Zip Code 3314 S Congress Austin, TX 78704		

Purpose of payment (See instructions regarding type of information required.)
endorsement stamp** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 11/19/2007	Payee name Carrabas Grill	Amount (\$) \$300.00
Payee address; City; State; Zip Code 11590 Research Blvd Austin, TX 78759		

Purpose of payment (See instructions regarding type of information required.)
Food for players at fund-raising golf tournament** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/16 Report: 20/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date 11/02/2007	5 Payee name Central Market #/061 6 Payee address; City; State; Zip Code 4001 N Lamar Blvd Austin, TX 78756	7 Amount (\$) \$26.99
---------------------------------	---	--

8 Purpose of payment (See instructions regarding type of information required.)
Employee Birthday Cake(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date 11/19/2007	Payee name FedEx Kinko's Payee address; City; State; Zip Code 2901-C Medical Arts Austin, TX 78705	Amount (\$) \$130.72
------------------------	--	--------------------------------

Purpose of payment (See instructions regarding type of information required.)
Hole sponsor signs at golf tournament(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date 11/06/2007	Payee name Fiesta Mart #64 Payee address; City; State; Zip Code 5510 S IH 35 Austin, TX 78745	Amount (\$) \$99.15
------------------------	---	-------------------------------

Purpose of payment (See instructions regarding type of information required.)
TCSO Fish/ Gumbo Cook-Off Fundraiser(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date 12/04/2007	Payee name Garden Ridge Payee address; City; State; Zip Code 19411 Atrium Place, Ste 170 Houston, TX 77084	Amount (\$) \$162.36
------------------------	--	--------------------------------

Purpose of payment (See instructions regarding type of information required.)
Office Christmas Tree(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/16 Report: 21/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

12/05/2007**5** Payee name
Hamilton, Greg (Sheriff)

6 Payee address; City; State; Zip Code
1605 Augusta Bend
Hutto, TX 78634**7** Amount
(\$)

\$500.00**8** Purpose of payment (See instructions regarding type of information required.)

Loan repayment (\$275.33) and Reimbursement for out-of-pocket expenditures (\$224.67)

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
HEB #03/425Amount
(\$)

07/31/2007

Payee address; City; State; Zip Code
1000 E 41st St
Austin, TX 78751

\$60.77

Purpose of payment (See instructions regarding type of information required.)

Cokes and ice for meeting with Mobile Mamography group in Zilker Park

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
HEB #03/425Amount
(\$)

07/31/2007

Payee address; City; State; Zip Code
1000 E 41st St
Austin, TX 78751

\$2.90

Purpose of payment (See instructions regarding type of information required.)

Cokes and ice for meeting with Mobile Mamography group in Zilker Park

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
HEB #03/425Amount
(\$)

10/17/2007

Payee address; City; State; Zip Code
1000 E 41st St
Austin, TX 78751

\$7.29

Purpose of payment (See instructions regarding type of information required.)

Breakfast with the Sheriff

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/16 Report: 22/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name	7 Amount (\$)
07/12/2007	HEB #9/202	
	6 Payee address; City; State; Zip Code 5808 Burnet Rd Austin, TX 78756	\$34.50

8 Purpose of payment (See instructions regarding type of information required.)

Food/Refreshments for Mobile Mammography event

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
10/08/2007	Hobby Lobby	
	Payee address; City; State; Zip Code 7950 Research Blvd Austin, TX 78750	\$94.69

Purpose of payment (See instructions regarding type of information required.)

Framing of campaign literature

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
10/18/2007	Hobby Lobby	
	Payee address; City; State; Zip Code 7950 Research Blvd Austin, TX 78750	\$22.64

Purpose of payment (See instructions regarding type of information required.)

Building Dedication Reception Decorations

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
10/18/2007	Hobby Lobby	
	Payee address; City; State; Zip Code 7950 Research Blvd Austin, TX 78750	\$14.05

Purpose of payment (See instructions regarding type of information required.)

Building Dedication Framed Poster

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/16 Report: 23/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

11/26/2007**5** Payee name
Hobby Lobby

6 Payee address; City; State; Zip Code
7950 Research Blvd
Austin, TX 78750**7** Amount
(\$)

\$79.56**8** Purpose of payment (See instructions regarding type of information required.)
Framing of picture for office(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Hobby LobbyAmount
(\$)

12/21/2007

Payee address; City; State; Zip Code
7950 Research Blvd
Austin, TX 78750

\$84.98

Purpose of payment (See instructions regarding type of information required.)
Framing for Office(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Houston'sAmount
(\$)

09/11/2007

Payee address; City; State; Zip Code
2408 W Anderson Ln
Austin, TX 78757

\$55.77

Purpose of payment (See instructions regarding type of information required.)
Lunch with employee(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Jerry's Artarama Custom Framing Store:007Amount
(\$)

11/07/2007

Payee address; City; State; Zip Code
6010 Interstate Hwy 35
Austin, TX 78752

\$75.00

Purpose of payment (See instructions regarding type of information required.)
Framing for office(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/16 Report: 24/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

10/12/2007**5** Payee name
La Concinita Restaurant**6** Payee address; City; State; Zip Code
4140 East 12th St
Austin, TX 78721**7** Amount
(\$)

\$14.02**8** Purpose of payment (See instructions regarding type of information required.)
Lunch with Employee(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
La Concinita RestaurantAmount
(\$)

10/30/2007

Payee address; City; State; Zip Code
4140 East 12th St
Austin, TX 78721

\$25.11

Purpose of payment (See instructions regarding type of information required.)
Lunch with Employee(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
LAPRAACAmount
(\$)

10/03/2007

Payee address; City; State; Zip Code
PO Box 861148
Los Angeles, CA 90086-1148

\$17.31

Purpose of payment (See instructions regarding type of information required.)
Travel to conference(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Longhorn Meat CompanyAmount
(\$)

12/10/2007

Payee address; City; State; Zip Code
2411 E MLK Blvd
Austin, TX 78702

\$151.88

Purpose of payment (See instructions regarding type of information required.)
Office Christmas Hams(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/16 Report: 25/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

10/17/2007**5** Payee name
Lost Creek Country Club**6** Payee address; City; State; Zip Code
2612 Lost Creek Blvd
Austin, TX 78746**7** Amount
(\$)

\$250.00**8** Purpose of payment (See instructions regarding type of information required.)

Deposit for fund-raising golf tournament (held 11/19)

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Lost Creek Country ClubAmount
(\$)

11/19/2007

Payee address; City; State; Zip Code
2612 Lost Creek Blvd
Austin, TX 78746

\$332.00

Purpose of payment (See instructions regarding type of information required.)

Drinks and gratuities at golf tournament

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
MarshallsAmount
(\$)

10/15/2007

Payee address; City; State; Zip Code
The Shops at Arborwalk
10515 N Mopac Expressway Blge F
Austin, TX 78759

\$89.85

Purpose of payment (See instructions regarding type of information required.)

Sheet Drive Fundraiser for Austin Childrens Shelter

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Maurice's Real PitAmount
(\$)

07/26/2007

Payee address; City; State; Zip Code
129 W Vet Mem. Blvd
Killleen, TX 76541

\$256.50

Purpose of payment (See instructions regarding type of information required.)

Fundraiser for World Children

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/16 Report: 26/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date

10/17/2007**5** Payee name
Mrs. Johnson's Bakery**6** Payee address; City; State; Zip Code
4909 Airport Blvd
Austin, TX 78751**7** Amount
(**\$**)

\$10.00**8** Purpose of payment (See instructions regarding type of information required.)

Breakfast with the Sheriff

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Nick's Stefs SteakhouseAmount
(**\$**)

10/02/2007

Payee address; City; State; Zip Code
339 S Hope St
Los Angeles, CA 90071

\$257.64

Purpose of payment (See instructions regarding type of information required.)

ComStat Meeting LAPD

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Office DepotAmount
(**\$**)

08/09/2007

Payee address; City; State; Zip Code
816 Tirado St
Austin, TX 78752

\$7.57

Purpose of payment (See instructions regarding type of information required.)

Envelopes for Ramadan Dinner @ Sheriff's Office

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
OMNI Los Angeles HotelAmount
(**\$**)

10/04/2007

Payee address; City; State; Zip Code
251 South Olive St
Los Angeles, CA 90012

\$258.02

Purpose of payment (See instructions regarding type of information required.)

Hotel for LA Trip

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/16 Report: 27/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name	7 Amount (\$)
12/14/2007	Pizza Hut	\$110.00
	6 Payee address; City; State; Zip Code 717 Ben White Austin, TX 78704	

8 Purpose of payment (See instructions regarding type of information required.)

Dawson Elementary A Work for Reading 3 Books

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
10/08/2007	Rockfish	\$208.16
	Payee address; City; State; Zip Code 1201 Lake Woodlands Dr Woodlands, TX 77380	

Purpose of payment (See instructions regarding type of information required.)

Dinner in conjunction with Harris County Jail Visit

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
08/11/2007	Sam's Club	\$115.20
	Payee address; City; State; Zip Code 130 Sundance Parkway Ste 300 Round Rock, TX 78681	

Purpose of payment (See instructions regarding type of information required.)

brisket for injured veterans' cook-out (Scott & White)

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
11/13/2007	Sam's Club	\$122.98
	Payee address; City; State; Zip Code 130 Sundance Parkway Ste 300 Round Rock, TX 78681	

Purpose of payment (See instructions regarding type of information required.)

Employee Appreciation food and supplies

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/16 Report: 28/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date 10/02/2007	5 Payee name Schlotzsky's Deli 6 Payee address; City; State; Zip Code Austin-Bergstrom International Airport Austin, TX 78759	7 Amount (\$) \$8.42
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8 Purpose of payment (See instructions regarding type of information required.)
Lunch for LA Trip9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 12/14/2007	Payee name Shell Payee address; City; State; Zip Code 2500 FM 1431 Round Rock, TX 78681	Amount (\$) \$20.00
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Purpose of payment (See instructions regarding type of information required.)
Gas for County Vehicle** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 09/07/2007	Payee name Springhill Restaurants Payee address; City; State; Zip Code 1144 Airport Blvd #270 Austin, TX 78704	Amount (\$) \$19.87
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Purpose of payment (See instructions regarding type of information required.)
Lunch with Jennie & Grey** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 07/25/2007	Payee name Stanley-Garrison & Associates Payee address; City; State; Zip Code 812 San Antonio St, Ste G 23 Austin, TX 78701	Amount (\$) \$450.00
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Purpose of payment (See instructions regarding type of information required.)
fund-raising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/16 Report: 29/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name Stanley-Garrison & Associates	7 Amount (\$)
10/08/2007	6 Payee address; City; State; Zip Code 812 San Antonio St, Ste G 23 Austin, TX 78701	\$203.34

8 Purpose of payment (See instructions regarding type of information required.)
fund-raising (\$165.00) plus expense reimbursement (\$38.22)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name Stanley-Garrison & Associates	Amount (\$)
11/14/2007	Payee address; City; State; Zip Code 812 San Antonio St, Ste G 23 Austin, TX 78701	\$482.03

Purpose of payment (See instructions regarding type of information required.)
fund-raising (\$315) plus expense reimbursement (\$167.03)** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name Stanley-Garrison & Associates	Amount (\$)
11/21/2007	Payee address; City; State; Zip Code 812 San Antonio St, Ste G 23 Austin, TX 78701	\$1,500.00

Purpose of payment (See instructions regarding type of information required.)
fund-raising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name Texas Land and Cattle	Amount (\$)
08/21/2007	Payee address; City; State; Zip Code 1101 S Mopac Austin, TX 78746	\$23.55

Purpose of payment (See instructions regarding type of information required.)
Lunch with Mary Earls regarding Austin State School** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 14/16 Report: 30/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
780000004 Date
08/23/20075 Payee name
Texas Land and Cattle6 Payee address; City; State; Zip Code
6007 N IH 35
Austin, TX 787527 Amount
(\$)
\$31.048 Purpose of payment (See instructions regarding type of information required.)
Possible New Hire Lunch(If travel outside of Texas, complete Schedule T) ☐9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Texas Land and CattleAmount
(\$)

08/23/2007

Payee address; City; State; Zip Code
6007 N IH 35
Austin, TX 78752

\$50.70

Purpose of payment (See instructions regarding type of information required.)
Traffic Officers Lunch(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Texas Land and CattleAmount
(\$)

09/04/2007

Payee address; City; State; Zip Code
6007 N IH 35
Austin, TX 78752

\$150.38

Purpose of payment (See instructions regarding type of information required.)
Lunch Meeting with Staff(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Texas Land and CattleAmount
(\$)

10/25/2007

Payee address; City; State; Zip Code
1101 S Mopac
Austin, TX 78746

\$31.28

Purpose of payment (See instructions regarding type of information required.)
Lunch with Sheryl Burst of Austin/Travis County Health & Human Services(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 15/16 Report: 31/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name	7 Amount (\$)
12/05/2007	The Ambassadors 6 Payee address; City; State; Zip Code 6929 Airport Blvd Austin, TX 78752	\$700.00

8 Purpose of payment (See instructions regarding type of information required.)
Annual Christmas party of black elected officials**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
12/31/2007	Travis County Democratic Party 6 Payee address; City; State; Zip Code 1311 E. Sixth St Austin, TX 78702	\$1,250.00

8 Purpose of payment (See instructions regarding type of information required.)
filing fee for place on March 4 primary ballot**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
07/17/2007	Wal-Mart 6 Payee address; City; State; Zip Code 702 SW 8th St Bentonville, AR 72716	\$62.98

8 Purpose of payment (See instructions regarding type of information required.)
Sheriff's Assoc. of Texas Hospitality Room**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
07/10/2007	Wal-Mart Store # 1185 6 Payee address; City; State; Zip Code 1030 Norwood Park Austin, TX 78753	\$95.53

8 Purpose of payment (See instructions regarding type of information required.)
Items for Juneteenth Celebration**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 16/16 Report: 32/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000**4** Date**5** Payee name

Wal-Mart Store # 1185

7 Amount
(\$)

12/18/2007

6 Payee address; City; State; Zip Code1030 Norwood Park
Austin, TX 78753

\$53.09

8 Purpose of payment (See instructions regarding type of information required.)

Items for Supervisor Incident Command Training

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 1/5 Report: 33/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name 823 Congress Garage	8 Amount (\$)
09/11/2007	6 Payee address; City; State; Zip Code 823 Congress Austin, TX 78701	\$8.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Greater Austin Crime Commission Breakfast (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Austin Convention Center	Amount (\$)
07/16/2007	Payee address; City; State; Zip Code 500 E Ceasar Chavez Austin, TX 78701	\$7.00
	Purpose of expenditure (See instructions regarding type of information required.) Mexican Consulate (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Austin Convention Center	Amount (\$)
11/01/2007	Payee address; City; State; Zip Code 500 E Ceasar Chavez Austin, TX 78701	\$7.00
	Purpose of expenditure (See instructions regarding type of information required.) Parking for Alpha Kappa Alpha Event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Four Seasons Hotel	Amount (\$)
09/17/2007	Payee address; City; State; Zip Code 98 San Antonio Blvd Austin, TX 78701	\$8.00
	Purpose of expenditure (See instructions regarding type of information required.) Parking for Mexican Consul Independence of Mexico (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name HEB #03/425	Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	\$18.31
	Purpose of expenditure (See instructions regarding type of information required.) Breakfast meeting with Cheif Acevedo (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/5 Report: 34/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name HEB #03/425	8 Amount (\$)
09/27/2007	6 Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	\$33.94
	7 Purpose of expenditure (See instructions regarding type of information required.) Promotion Ceremony (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name HEB #03/425	Amount (\$)
12/06/2007	Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	\$40.31
	Purpose of expenditure (See instructions regarding type of information required.) Promotion Ceremony (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name HEB #8/045	Amount (\$)
07/26/2007	Payee address; City; State; Zip Code 2400 S Congress Ave Austin, TX 78704	\$62.98
	Purpose of expenditure (See instructions regarding type of information required.) Sheriff's Office Promotion Ceremony (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Hilton Austin Airport	Amount (\$)
08/14/2007	Payee address; City; State; Zip Code 9515 New Airport Dr Austin, TX 78719	\$62.00
	Purpose of expenditure (See instructions regarding type of information required.) Capital Area Law Enforcement Executive luncheon (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name LA Quinta Inn & Suites	Amount (\$)
10/09/2007	Payee address; City; State; Zip Code 5555 Airport Blvd Austin, TX 78752	\$85.00
	Purpose of expenditure (See instructions regarding type of information required.) Entertainment in conjunction with Sheriff's Office event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/5 Report: 35/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name Noe Bar	8 Amount (\$)
10/03/2007	6 Payee address; City; State; Zip Code Omni Los Angeles Hotel 251 South Olive St Los Angeles, CA 90012	\$29.36
	7 Purpose of expenditure (See instructions regarding type of information required.) LAPD ComStat (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Office Depot	Amount (\$)
12/05/2007	Payee address; City; State; Zip Code 816 Tirado St Austin, TX 78752	\$14.06
	Purpose of expenditure (See instructions regarding type of information required.) Envelopes for Sheriff's Christmas Cards (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Sambuca	Amount (\$)
10/08/2007	Payee address; City; State; Zip Code 909 Texas Ave #F Houston, TX 77002	\$27.25
	Purpose of expenditure (See instructions regarding type of information required.) Houston Harris County Jail Tour (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Sambuca	Amount (\$)
10/08/2007	Payee address; City; State; Zip Code 909 Texas Ave #F Houston, TX 77002	\$13.25
	Purpose of expenditure (See instructions regarding type of information required.) LAPD ComStat (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Shell	Amount (\$)
09/25/2007	Payee address; City; State; Zip Code 9704 Giles Austin, TX 78754	\$10.02
	Purpose of expenditure (See instructions regarding type of information required.) Gas for Patrol Car (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/5 Report: 36/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date 09/26/2007	5 Payee name Snappy Mart 6 Payee address; City; State; Zip Code 500 E 51st St Austin, TX 78751	8 Amount (\$) \$5.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Gas for Patrol Car (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/17/2007	Payee name Tacqueria Jefe Payee address; City; State; Zip Code 6300 N Lamar Blvd Austin, TX 78752 Purpose of expenditure (See instructions regarding type of information required.) Breakfast with Sheriff (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$31.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 07/13/2007	Payee name University of Texas Club Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712 Purpose of expenditure (See instructions regarding type of information required.) Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$57.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 07/19/2007	Payee name University of Texas Club Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712 Purpose of expenditure (See instructions regarding type of information required.) Health & Human Services Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$30.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 08/13/2007	Payee name University of Texas Club Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712 Purpose of expenditure (See instructions regarding type of information required.) Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$45.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/5 Report: 37/38

2 FILER NAME Hamilton, Gregory (Hon.)

3 ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name University of Texas Club	8 Amount (\$)
09/06/2007	6 Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712	\$62.62
	7 Purpose of expenditure (See instructions regarding type of information required.) Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name University of Texas Club	Amount (\$)
09/18/2007	Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712	\$64.52
	Purpose of expenditure (See instructions regarding type of information required.) Lunch with School Official Law Enforcement Academy (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name University of Texas Club	Amount (\$)
09/20/2007	Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712	\$35.54
	Purpose of expenditure (See instructions regarding type of information required.) Lunch with Brett Spicer (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name UT Manor St Garage	Amount (\$)
09/18/2007	Payee address; City; State; Zip Code PO Box 7546 Austin, TX 78713	\$4.00
	Purpose of expenditure (See instructions regarding type of information required.) Lunch with Patrick Patterson LBJ Principal (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I**The ~~INSTRUCTION~~ GUIDE explains how to complete this form.**1** PAGE #
Schedule: 1/1 Report: 38/38**2** FILER NAME Hamilton, Gregory (Hon.)**3** ACCOUNT # (Ethics Commission filers)
78000000

4 Date	5 Payee name	8 Amount (\$)
11/24/2007	NAACP-AUSTIN	
	6 Payee address; City; State; Zip Code 1704 E 12th St Austin, TX 78702	\$500.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Charitable donation: table for 42nd Annual DeWitty-Overton Freedom Fund Banquet	
Date	Payee name	Amount (\$)
09/14/2007	National Latino Peace Officers' Association of Central Texas	
	Payee address; City; State; Zip Code PO Box 685153 Austin, TX 78768	\$320.00
	Purpose of expenditure (See instructions regarding type of information required.) charitable donation	